COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

(Page 1)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name;

	tor (if plural names are listed below) of	of the subject matter which is cla	is listed below) or an original, first and aimed and for which a patent is sought	
on the invention entitled				
States App	lication No. or PCT International Ap	to was filed on	, as United	
		d and understand the contents	of the above-identified specification,	
§1.56.	I acknowledge the duty to disclose	information which is material	to patentability as defined in 37 CFR	
least one co	(s) for patent or inventor's certificate puntry other than the United States, li	, or § 365(a) of any PCT internated below and have also identi	9(a)-(d) or §365(b), of any foreign ational application which designates at affed below any foreign application for a date before that of the application on (Yes/No)	
Country	Application No.	Filed (Day/Mo./Yr.)	Priority Claimed	
below:	I hereby claim the benefit under 35	U.S.C. § 119(e) of any United S	States provisional application(s) listed	
	Application No.	Filed (Day/Mo./Yr.)		
PCT intern			tates application(s), or § 365(c) of any insofar as the subject matter of each of	

the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. § 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 C.F.R. § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

Status

Application No.

Filed (Day/Mo./Yr.)

(Patented, Pending, Abandoned)

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I hereby appoint the practitioners associated with the firm and Customer Number provided below to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith, and direct that all correspondence be addressed to the address associated with that Customer Number:

FITZPATRICK, CELLA, HARPER & SCINTÓ Customer Number: 05514

Thereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Pull Name of Sole or First Inventor Joseph R Inventor's signature	. Pearce
Date 8/6/2003	Citizen/Subject of U.S.
Residence Princeville, Hawaii	
Post Office Address P.O. BOX 223536.	Princeville, Hawaii 96722

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